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FAX Transmission Sheet

Date: 8/28/2006
From: Douglas Golightly
To: Commissioner for Patents
Organization: U.S. Patent and Trademark Office
Fax: (571) 273-8300
Subject: Serial No.: 10/716,619

You should receive 14 pages including this cover sheet.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: DALEY <i>et al.</i>) Confirmation No. 6354
Serial No.: 10/716,619) Group Art Unit: 1632
Filed: November 20, 2003) Examiner: Shukla, Ram R.
For: Hematopoietic Cell Culture Nutrient Supplement) Docket No. 0942.3750002/RWE/FRC
) Customer Number: 52059
) <u>TRANSMITTAL LETTER</u>


Commissioner for Patents
U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith are the following documents in the above-identified application.

- ☒ Reply to Restriction Requirement and Amendment
- ☒ Fee Transmittal
- ☒ Credit Card Payment Form
- ☒ Petition for Extension of Time

CERTIFICATE OF TRANSMISSION

I HEREBY CERTIFY THAT THIS PAPER AND THE DOCUMENTS REFERRED AS BEING ATTACHED OR ENCLOSED HEREWITH ARE BEING FACSIMILE TRANSMITTED TO THE UNITED STATES PATENT AND TRADEMARK OFFICE ON August 28, 2006 TO 1.571.273.8300 By Mary E. Gillette 

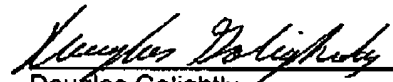
DALEY, et al.
Serial No. 10/716,619

Docket No. 0942.3750002/RWE/FRC
IVGN 140.1 CIP

It is not believed that extensions of time are required beyond those that may otherwise be provided for in accompanying documents. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefore are hereby authorized to be charged to the Deposit Account No. 13-3900.

Respectfully submitted,

Date: August 28, 2006


Douglas Golightly
Reg. No. 51,244

Invitrogen Corporation
Customer Number 52059
Phone: (240) 379-4686
Facsimile: (541) 335-0354

PTO/SB/17 (07-08)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	270.00
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Complete if Known	
Application Number	10/716,619
Filing Date	November 20, 2003
First Named Inventor	DALEY, John P.
Examiner Name	Shukla, Ram R.
Art Unit	635* 1632
Attorney Docket No.	0942.375002/RWE/FRC

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METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ Note ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 13-3890 Deposit Account Name: Invitrogen Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	300	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 24-21 - 20 or HP = 3 x 50 = 150.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 3 - 3 or HP = 0 x 200 = 0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>24-21</u> - 100 = <u>14</u>	<u>14</u>	<u>1</u>	<u>125</u>	<u>125.00</u>

4. OTHER FEE(S)

Description	Fee (\$)	Fee Paid (\$)
Non-English Specification. \$130 fee (no small entity discount)	<u>130.00</u>	<u>130.00</u>
Other (e.g., late filing surcharge): <u>One Month Extension of Time</u>	<u>120.00</u>	<u>120.00</u>

SUBMITTED BY

Signature: <u>Douglas Golightly</u>	Registration No. (Attorney/Agent): <u>51,244</u>	Telephone: <u>240-379-4686</u>
Name (Print/Type): <u>Douglas Golightly</u>	Date: <u>August 28, 2006</u>	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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